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LOBBYING EXPENDITURE REPORT COVERING JANUARY 1 THROUGH JUNE 30 DUE AUGUST 15 COVERING JULY 1 THROUGH DECEMBER 31 DUE FEBRUARY 15	Lobhyist's Registration Number	
Instructions • Print in ink or type.	FOR OFFICE USE ONLY Postmark Date: 1 14 (2)	
 Fill in Registration Number in spaces provided. Complete form and return to the Board of Ethics, 8401 United Plaza Blvd., Suite 200, Italon Rouge, LA 70809 (225) 922-1400. This form must be delivered or postmarked by the due date. This form may be faxed to (225) 922-1414. The original should be forwarded on the day of fax transmittal. 	10 00776	
1. Name CONWECC RESECCA	<u>c</u>	
2. Business Address H30 Tolone Ave New Orl	Siate Zip	
Mailing Address 1430 Tolone Ave. TW34 New 3. Business Phone 504-988-6659 Area Code and Telephone Number	DIDUBUIZ TH JOHD-501	
Total of all expenditures made January 1 through June 30: (Include expenditures from Schedules A and B)	783.15	
Total of all expenditures made July 1 through December 31: \$ (When Applicable) (Include expenditures from Schedules A and B)	O	
6. Total of all expenditures made during calendar year. (Line 4 added with Line 5 should equal Line 6)	783.15	
7. Did you make an expenditure exceeding \$50 on one occasion for any o	one legislator:	
From July 1 through December 31? Yes You No	□ NA N	
If the answer to either question in Number 7 above is YES, please com	plete Schedule A and attach.	
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LOBBYING EXPENDITURE REPORT



8.	Did you make expenditures exceeding the sum of \$250 for any one legislator:	
	From January 1 through June 30? Yes No No NA	
	If the answer to either question in Number 8 above is YES, please complete Schedule A and attach.	
9.	Did you expend funds for a reception, social gathering, or other function to which the entire legislature, either house, any standing committee, select committee, statutory committee, committee created by resolution of either house, subcommittee of any committee, recognized caucus, or any delegation thereof were invited during the reporting period?	
	□ Yes No	
	If the answer to Number 9 above is YES, please complete Schedule B and attach.	
	CERTIFICATION OF ACCURACY	
	I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; that all reportable expenditures have been included herein; and that no information required by the Lubbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted. Signature of Lubbyist	
	Form 602, New 1979	

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